

REQUEST FOR QUOTATION (THIS IS NOT AN ORDER)			THIS RFQ <input type="checkbox"/> IS <input type="checkbox"/> IS NOT A SMALL BUSINESS SET-ASIDE			PAGE 1 OF 11 PAGES	
1. REQUEST NO. N00173-07-Q-0082		2. DATE ISSUED 6-21-07		3. REQUISITION/PURCHASE REQUEST NO. 61-0089-07		4. CERT. FOR NAT. DEF. UNDER BDSA REG. 2 AND/OR DMS REG. 1	
5a. ISSUED BY Supply Officer (Code 3410) NRL Washington D.C. 20375-5329						6. DELIVER BY (Date) 8-2-07	
5b. FOR INFORMATION CALL: (NO COLLECT CALLS)						7. DELIVERY	
NAME Cynthia V. Offutt			TELEPHONE NUMBER AREA CODE 202 NUMBER 767-3452			<input checked="" type="checkbox"/> FOB DESTINATION <input type="checkbox"/> OTHER (See Schedule)	
						9. DESTINATION	
8. TO:						a. NAME OF CONSIGNEE Naval Research Laboratory	
a. NAME All Quoters			b. COMPANY			b. STREET ADDRESS 4555 Overlook Ave. S.W. Bldg 49	
c. STREET ADDRESS						c. CITY Washington	
d. CITY			e. STATE		f. ZIP CODE		d. STATE DC
							e. ZIP CODE 20375-5329
10. PLEASE FURNISH QUOTATIONS TO THE ISSUING OFFICE IN BLOCK 5a ON OR BEFORE CLOSE OF BUSINESS (Date) 6-21-07			IMPORTANT: This is a request for information, and quotations furnished are not offers. If you are unable to quote, please so indicate on this form and return it to the address in Block 5a. This request does not commit the Government to pay any costs incurred in the preparation of the submission of this quotation or to contract for supplies or service. Supplies are of domestic origin unless otherwise indicated by quoter. Any representations and/or certifications attached to this Request for Quotation must be completed by the quoter.				
11. SCHEDULE (Include applicable Federal, State and local taxes)							
ITEM NO. (a)	SUPPLIES/SERVICES (b)			QUANTITY (c)	UNIT (d)	UNIT PRICE (e)	AMOUNT (f)
	See continuation sheets						
12. DISCOUNT FOR PROMPT PAYMENT				a. 10 CALENDAR DAYS (%)	b. 20 CALENDAR DAYS (%)	c. 30 CALENDAR DAYS (%)	d. CALENDAR DAYS
							NUMBER PERCENTAGE
NOTE: Additional provisions and representations <input type="checkbox"/> are <input type="checkbox"/> are not attached.							
13. NAME AND ADDRESS OF QUOTER				14. SIGNATURE OF PERSON AUTHORIZED TO SIGN QUOTATION		15. DATE OF QUOTATION	
a. NAME OF QUOTER							
b. STREET ADDRESS				16. SIGNER			
c. COUNTY				a. NAME (Type or print)		b. TELEPHONE	
						AREA CODE	
d. CITY			e. STATE	f. ZIP CODE	b. TITLE (Type or print)		NUMBER

STANDARD FORM 36 JULY 1966 GENERAL SERVICES ADMINISTRATION FED. PROC. REG. (41 CFR) 1-16.101		CONTINUATION SHEET		REF. NO. OF DOC. BEING CONT'D N00173-07-Q-0082		PAGE OF 2 11	
NAME OF OFFEROR CONTRACTOR							
All Quoters							
ITEM NO.	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT		
001	OMNI-LAB system, includes glovebox, antechamber, purifier, PLC controls, display stand 110V 60Hz. Part No. VAC101965	1	ea				
002	Gloves, butyl, .03" ; left and right pair no charge Part No. STD VAC 2632-2	1	ea				
003	Vacuum pump, Edwards, 6.9CFM upgrade Part No. VAC 100617/618	1	ea				
004	Analyzer assy, oxygen, OMNI, with alarm Part No. VAC 102238	1	ea				
005	Interface assy, NPT, 1" welded feedthru Part No. VAC100175	5	ea				
006	Interface assy, NPT, 1' 2" ; welded feedthru Part No. VAC100173	5	ea				
007	Interface assy, 8-pin octal feedthru Part No. VAC014114	1	ea				
008	Lexan feedthru panel Part No. VAC TBD	3	ea				
009	Interface assy, 20 amp, 5-way binding posts Part No. VAC100626	12	ea				
010	Interface assy, BNC, feedthru Part No. VAC100627	12	ea				
011	Analyzer assy, moisture, OMNI, with alarm Part No. VAC102239	1	ea				
(Brand Name or Equal)							
If available please include a published price list or a cost breakdown and retransmit the RFQ package to the following fax number 202-767-1708.							
Any questions concerning this Request for Quotation (RFQ) must be emailed to SolQnA@condor.nrl.navy.mil at least five (5) days before closing date shown in block 10 on page 1 of this RFQ.							